

Application for early course registration

Surname, First name: _____ Student ID: _____

Email address: _____

Semester: _____ Study program: _____

Hereby, I apply to register for following courses:

Module: _____ Module number: _____

Course title: _____

Group: _____ Date/Time: _____

Module: _____ Module number: _____

Course title: _____

Group: _____ Date/Time: _____

Module: _____ Module number: _____

Course title: _____

Group: _____ Date/Time: _____

Module: _____ Module number: _____

Course title: _____

Group: _____ Date/Time: _____

Module: _____ Module number: _____

Course title: _____

Group: _____ Date/Time: _____

Module: _____ Module number: _____

Course title: _____

Group: _____ Date/Time: _____

Reasons for application (please indicate your relevant situation and provide the necessary documents):

- Child in need of supervision and under the age of 12 years (evidenced by a copy of the birth certificate)
- Medical confirmation of the pregnancy with indication of the delivery date
- Chronic health condition/ Disability (this option needs a written explanation why early course registration is important for your condition and needs to be confirmed by a medical practitioner)

Please note:

Courses can only take place when a sufficient number of students register. Even when registering early for courses, it might be the case that seminars/groups/courses will be cancelled due to lack of participants. Therefore, we cannot guarantee a place in your chosen courses for early registration.

The application will only be considered if it has been submitted in due time, signed and submitted with the required documentation to the faculty's diversity officer, Ms. Andrea Göttler

Date: _____

Signature applicant: _____